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LENOX

CHINA • CRYSTAL

POMONA NEW JERSEY 08240

CAS9 - September 21, 1989

NJDEP
Division of Hazardous Waste Management
Attn: Carolyn Grasso
Southern Regional Office
20 East Clementon Road
Gibbsboro, NJ 08026

Dear Ms. Grasso:

As requested during your inspection at our facility on September 19, 1989, the following documents are enclosed:

- 1) Two transmittal letters relating to copies of PA Department of Environmental Resources Uniform Hazardous Waste Manifest, PAC 1226820 (Generator State and Destination State copies). At the time of shipment on August 15, 1989, we inadvertently failed to forward these copies to the NJDEP and PA Dept of Environmental Resources. The manifest copies were sent via certified mail on September 20, 1989 with these transmittal letters.
- 2) Test report from Northeastern Analytical Corporation covering the analysis of a sample of degreaser sludge taken on December 6, 1988.
- 3) Listing of Employees trained February, 1988 thru June, 1989 (Lenox EPA Procedure #017).

If I can be of further assistance, please do not hesitate to contact me at (609) 965-8505.

Sincerely,

J. A. Skladanek

J. A. Skladanek, P.E.
Manager, Maintenance & Trades

JAS/mp1
Enc1

651110



LENOX

CHINA • CRYSTAL

POMONA NEW JERSEY 08240

September 19, 1989

State of NJ
Department of Environmental Protection
Division of Hazardous Waste Management
Manifest Section
CN 028
Trenton, NJ 08625

To Whom It May Concern:

Enclosed is the Generator State copy of PA Dept of Environmental Resources Uniform Hazardous Waste Manifest, PAC 1226820. This manifest covered a shipment on August 15, 1989 to Envirite, York, PA. We inadvertently failed to forward this copy to you at that time.

Sincerely,

J. A. Skladanek P.E.

J. A. Skladanek, P.E.
Manager, Maintenance & Trades

JAS/mp1
Enc1

CERTIFIED MAIL NO. P 769 671 713



ER-SWM-51 REV. 12/88

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law but is required by State law.	
3. Generator's Name and Mailing Address LENOX CHINA TILTON NJ 08240 609 641-3700		4. US EPA ID Number NJSD00232507489007		A. State Manifest Document Number PAC 1226820		
5. Transporter 1 Company Name SS TRANSPORTATION & NJSD071629976		6. US EPA ID Number		B. State Gen. ID SAME		
7. Transporter 2 Company Name		8. US EPA ID Number		C. State Trans. ID PA-AH 10015		
9. Designated Facility Name and Site Address ENVIRITE 1600 PENNA AVE YORK PA 17404		10. US EPA ID Number IPAD010154045		D. Transporter's Phone (609 764-2741)		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers		13. Total Quantity		
a. RQ HAZARDOUS WASTE, SOLID N.O.S ORM-E, NA 9189 (D008)		No. Type		Unit Wt/Vol		
b.						
c.						
d.						
J. Additional Descriptions for Materials Listed Above (Include physical state and hazard code)		K. Handling Codes for Wastes Listed Above				
Lab Pack Physical State		Lab Pack Physical State				
a. <input type="checkbox"/> 5		c. <input type="checkbox"/>		b. <input type="checkbox"/>		
b. <input type="checkbox"/>		d. <input type="checkbox"/>		d. <input type="checkbox"/>		
15. Special Handling Instructions and Additional Information DECAL # TEMPORARY SEE ATTACHED BURDEN DISCLOSURE SHEET NJ DEP 503217						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford						
Printed/Typed Name WILMOT Sobes		Signature Wilmot Sobes		MONTH DAY YEAR 10 8 15 89		
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name Bernie Devone		Signature Bernie Devone		MONTH DAY YEAR 10 8 15 89		
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name		Signature		MONTH DAY YEAR		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name Signature MONTH DAY YEAR						

PAC 1226820

P 769 671 713
RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL
(See Reverse)

Sent to NJDEP	
DIV OF HAZ. WASTE MGT	
Street and No MANIFEST SEC	
CN 028	
P.O., State and ZIP Code	
TRENTON NJ 08625	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$
Postmark or Date	
DAC 1226820	

PS Form 3800, June 1985

Fold at line over top of envelope to the right
of the return address.

CERTIFIED

P 769 671 713

MAIL

completed on the reverse side?

<p>SENDER: Complete Items 1 and 2 when additional services are desired, and complete items 3 and 4. Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.</p> <p>1. <input type="checkbox"/> Show to whom delivered, date, and addressee's address. (Extra charge) 2. <input type="checkbox"/> Restricted Delivery (Extra charge)</p>	
<p>3. Article Addressed to:</p> <p>STATE OF NJ DEPT OF ENVIR. PROTECTION DIV OF HAZ WASTE MGT MANIFEST SECTION CN 028 TRENTON NJ 08625</p>	<p>4. Article Number</p> <p>P 769 671 713</p> <p>Type of Service:</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise</p> <p>Always obtain signature of addressee or agent and DATE DELIVERED.</p>
<p>5. Signature - Address</p> <p>X</p>	<p>8. Addressee's Address (ONLY if requested and fee paid)</p> <p>DAC 1226820</p>
<p>6. Signature - Agent</p> <p>X</p>	
<p>7. Date of Delivery</p>	

PS Form 3811, Mar. 1988

* U.S.G.P.O. 1988-212-865

DOMESTIC RETURN RECEIPT

State of New Jersey
Department of Environmental Protection
Division of Hazardous Waste Management
Manifest Section
CN 028
Trenton, NJ 08625

LENOX

CHINA • CRYSTAL

POMONA NEW JERSEY 08240

September 19, 1989

PA Department of Environmental Resources
Bureau of Waste Management
P.O. Box 8550
Harrisburg, PA 17105-8550

To Whom It May Concern:

Enclosed is the Destination State copy of PA Dept of
Environmental Resources Uniform Hazardous Waste Manifest, PAC
1226820. This manifest covered a shipment on August 15, 1989 to
Envirite, York, PA. We inadvertently failed to forward this copy
to you at that time.

Sincerely,

J. A. Skladanek P.E.
J. A. Skladanek, P.E.
Manager, Maintenance & Trades

JAS/mpi
Encl

CERTIFIED MAIL NO. P 769 671 714

Bureau of Waste Management
P. O. Box 8550
Harrisburg, PA 17105-8550

Form approved.
OMB No. 2050-0039
Expires 9-30-91

ER-SWM-51: REV. 12/86

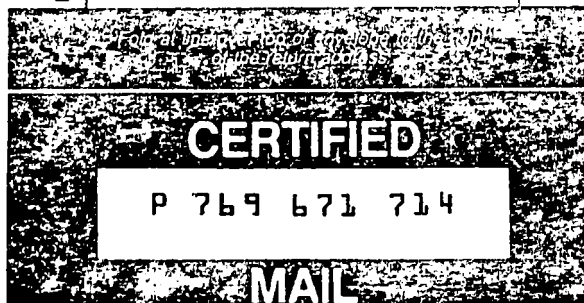
UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law but is required by State law.		
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4. Generator's Phone				B. State Gen. ID SAME			
5. Transporter 1 Company Name SJ TRANSPORTATION				C. State Trans. ID PA-AH 00151			
6. US EPA ID Number NJSD 071629976				D. Transporter's Phone (609 764-2744)			
7. Transporter 2 Company Name				E. State Trans. ID PA-AH			
8. US EPA ID Number				F. Transporter's Phone ()			
9. Designated Facility Name and Site Address ENVIRITE 1600 PENNA AVE YORK PA 17404				10. US EPA ID Number IPAD010154045			
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				12. Containers	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. RQ HAZARDOUS WASTE, SOLID N.O.S. ORM-E, NA 9189 (D008)				No.	Type		
b.							
c.							
d.							
J. Additional Descriptions for Materials Listed Above (include physical state and hazard code)				K. Handling Codes for Wastes Listed Above			
Lab Pack		Physical State		Lab Pack		Physical State	
a.		S		c.			
b.				d.			
15. Special Handling Instructions and Additional Information DECAL # TEMPORARY NJ DEP 503217 SEE ATTACHED BURDEN DISCLOSURE SHEET							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled and are in all respects in proper condition for transport by highway according to applicable international and national government regulations							
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Printed/Typed Name WILMOT Johns				Signature W. Johns		MONTH DAY YEAR 10 8 15 89	
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name Bernie DeVone				Signature Bernie DeVone		MONTH DAY YEAR 10 8 15 89	
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name				Signature		MONTH DAY YEAR	
19. Discrepancy Indication Space							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.							
Printed/Typed Name				Signature		MONTH DAY YEAR	

P 769 671 714
RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
 NOT FOR INTERNATIONAL MAIL
 (See Reverse)

Sent to <i>PA Dept of Environmental Resources</i>	
<i>Bureau of Waste Mgt</i>	
Street and No. <i>P.O. Box 8550</i>	
P.O. State and ZIP Code <i>HARRISBURG PA 17105-8550</i>	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$
Postmark or Date	

PS Form 3800, June 1985



SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
 Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. <input type="checkbox"/> Show to whom delivered, date, and addressee's address. (Extra charge)	2. <input type="checkbox"/> Restricted Delivery (Extra charge)
3. Article Addressed to: <i>PA DEPT OF ENVIR. RESOURCES</i> <i>BUREAU OF WASTE MGT</i> <i>PO Box 8550</i> <i>HARRISBURG PA 17105-8550</i>	4. Article Number <i>P 769 671 714</i>
Type of Service: <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Express Mail <input type="checkbox"/> Insured <input type="checkbox"/> COD <input type="checkbox"/> Return Receipt for Merchandise	
Always obtain signature of addressee or agent and DATE DELIVERED.	
5. Signature — Address <i>X</i>	8. Addressee's Address (ONLY if requested and fee paid) <i>PA C 1226820</i>
6. Signature — Agent <i>X</i>	
7. Date of Delivery	

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 **DOMESTIC RETURN RECEIPT**

Pennsylvania Department of Environmental Resources
 Bureau of Waste Management
 P.O. Box 8550
 Harrisburg, PA 17105-8550